U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number **U** - 7034

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

	1 / 1 / 2004 Through: 12 / 31 / 2004	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name Eric S Waterman	Name I.M.P.A.C.T.	
	Labor Organization File Number 000052	
P.O. Box, Bldg., Room No., if any West Lobby	P.O. Box, Building and Room Number, if any West Lobby	
Street 1750 New York Avenue NW	Street 1750 New York Avenue NW	
City Washington	City Washington	
State District of Columbia ZIP Code + 4 20006	State District of Columbia ZIP Code + 4 20006	
5. Position in labor organization. Chief Executive Officer	n de la companya del companya de la companya del companya de la co	
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):		
A. Heid an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name	Man artikota ere	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
	7.b. Amount.	
Street മുള്ള അന്നേള് എന്നു പുത്രമുന്നു വൃഷ്യ വാരു	the state of the s	
Control of the control of the result of the first of the	to the second process of the second process	
State ZIP*Code + 41 and page of the first state and the state of the s	The contract of the state of th	
Signature		
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed EWE	On 08/10/2005 202-393-1147	
	Date Telephone Number	

ggi i si ang ki

Name of Person Filing Eric Waterman	File Number <b>U-</b>	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).  Name Mosaic  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 4801 Viewpoint Place  City Cheverly  State Maryland  ZIP Code + 4 20781	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name I.M.P.A.C.T.  Trade Name, if any:  P.O. Box, Bldg., Room No., if any West Lobby  Street 1750 New York Avenue NW  City Washington	11.a. Nature of such dealing.  Provides design and printing of stationery and marketing materials.  11.b. Approximate dollar value of such dealing. \$147,724  12.a. Nature of interest held or income received.  Luncheon:	
State District of Columbia ZIP Code + 4 20006	06/10/2004 Smith \$ Wollensky, Washington D.C.  12.b. Amount. \$43	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:	14.a. Nature of payment.	
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	

Name of Person Filing Eric Waterman	File Number <b>U-</b>

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Mosaic	a. Labor Organization
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	b. Trust
Street 4801 Viewpoint Place	c. Employer
City Cheverly	
State Maryland ZIP Code + 4 20781	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name I.M.P.A.C.T.	Provides design and printing of stationery and marketing materials.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any West Lobby	
Street 1750 New York Avenue NW	
City Washington	
State District of Columbia ZIP Code + 4 20006	11.b. Approximate dollar value of such dealing. \$147,724
	12.a. Nature of interest held or income received.
	Luncheon: 06/23/2004 Smith & Wollensky, Washington D.C.
	12.b. Amount. \$42

Name of Person Filing Eric Waterman	File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Mosaic	a. Labor Organization
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	b. Trust
Street 4801 Viewpoint Place	c. Employer
Cubot 4801 Viewpoint Place	
City Cheverly	
State Maryland ZIP Code + 4	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name I.M.P.A.C.T.	Provides design and printing of stationery and marketing materials.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any West Lobby	
Street 1750 New York Avenue NW	·
City Washington	
State District of Columbia ZIP Code + 4 20006	11.b. Approximate dollar value of such dealing. \$147,724
	12.a. Nature of interest held or income received.
*	Luncheon: 10/28/2004 Cafe at the Corcoran, Washington D.C.
	12.b. Amount. \$31